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PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	09/549,642
Filing Date	April 14, 2000
First Named Inventor	De Faire
Group Art Unit	1642
Examiner Name	Brumback, B.
Attorney Docket Number	314572-101F

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ENCLOSURES (check all that apply)

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<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): - Check No. 1004206 - Acknowledgement Postcard
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<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

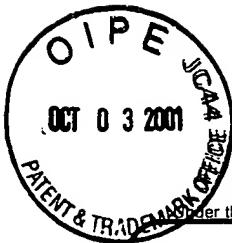
Firm or Individual name	Arthur E. Jackson, Ph.D., Reg. # 34,354
Signature	
Date	October 1, 2001

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: 10/01/2001

Typed or printed name	Arthur E. Jackson, Ph.D.
Signature	
Date	October 1, 2001

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PTO/SB/17 (11-00)

Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 460.00)

Complete if Known

Application Number	09/549,642
Filing Date	April 14, 2000
First Named Inventor	De Faire
Examiner Name	Brumback, B.
Group Art Unit	1642
Attorney Docket No.	314572-101F

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METHOD OF PAYMENT					
1. <input type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:					
Deposit Account Number	04-0480				
Deposit Account Name					
<input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17					
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27					
2. <input checked="" type="checkbox"/> Payment Enclosed:					
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other					
FEE CALCULATION					
1. BASIC FILING FEE					
Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid		
101 710	201 355	Utility filing fee			
106 320	206 160	Design filing fee			
107 490	207 245	Plant filing fee			
108 710	208 355	Reissue filing fee			
114 150	214 75	Provisional filing fee			
SUBTOTAL (1) (\$ 0.00)					

2. EXTRA CLAIM FEES					
Total Claims	Extra Claims	Fee from below	Fee Paid		
	-20** =		=		
Independent Claims	- 3** =		=		
Multiple Dependent			=		
Large Entity Small Entity					
Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid		
103 18	203 9	Claims in excess of 20			
102 80	202 40	Independent claims in excess of 3			
104 270	204 135	Multiple dependent claim, if not paid			
109 80	209 40	** Reissue independent claims over original patent			
110 18	210 9	** Reissue claims in excess of 20 and over original patent			
SUBTOTAL (2) (\$ 0.00)					

*or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)					
3. ADDITIONAL FEES					
Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid		
105 130	205 65	Surcharge - late filing fee or oath			
127 50	227 25	Surcharge - late provisional filing fee or cover sheet			
139 130	139 130	Non-English specification			
147 2,520	147 2,520	For filing a request for ex parte reexamination			
112 920*	112 920*	Requesting publication of SIR prior to Examiner action			
113 1,840*	113 1,840*	Requesting publication of SIR after Examiner action			
115 110	215 55	Extension for reply within first month			
116 390	216 195	Extension for reply within second month		460.00	
117 890	217 445	Extension for reply within third month			
118 1,390	218 695	Extension for reply within fourth month			
128 1,890	228 945	Extension for reply within fifth month			
119 310	219 155	Notice of Appeal			
120 310	220 155	Filing a brief in support of an appeal			
121 270	221 135	Request for oral hearing			
138 1,510	138 1,510	Petition to institute a public use proceeding			
140 110	240 55	Petition to revive - unavoidable			
141 1,240	241 620	Petition to revive - unintentional			
142 1,240	242 620	Utility issue fee (or reissue)			
143 440	243 220	Design issue fee			
144 600	244 300	Plant issue fee			
122 130	122 130	Petitions to the Commissioner			
123 130	123 130	Petitions related to provisional applications			
126 180	126 180	Submission of Information Disclosure Stmt			
581 40	581 40	Recording each patent assignment per property (times number of properties)			
146 710	246 355	Filing a submission after final rejection (37 CFR § 1.129(a))			
149 710	249 355	For each additional invention to be examined (37 CFR § 1.129(b))			
179 710	279 355	Request for Continued Examination (RCE)			
169 900	169 900	Request for expedited examination of a design application			
Other fee (specify) _____					
*Reduced by Basic Filing Fee Paid				SUBTOTAL (3) (\$ 460.00)	

SUBMITTED BY					
Name (Print/Type)	Arthur E. Jackson		Registration No. (Attorney/Agent)	34,354	Telephone
Signature			Date	October 1, 2001	

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